

SOUTH SUDAN – CRISIS

FACT SHEET #55, FISCAL YEAR (FY) 2014

SEPTEMBER 30, 2014

NUMBERS AT A GLANCE

1,352,000

Total Number of Individuals Displaced in South Sudan since December 15

(Includes approximately 6,700 displaced persons in Abyei Area)

U.N. Office for the Coordination of Humanitarian Affairs (OCHA) – September 25, 2014

96,700

Total Number of Individuals Seeking Refuge at U.N. Mission in the Republic of South Sudan (UNMISS) Compounds

UNMISS – September 25, 2014

1,255,300

Total Number of Individuals Displaced in Other Areas of South Sudan

UNMISS – September 25, 2014; OCHA – September 25, 2014

460,100*

Refugees from South Sudan in Neighboring Countries since December 15

**Including an unconfirmed number of refugees, returnees, and nomads who have fled to Sudan*

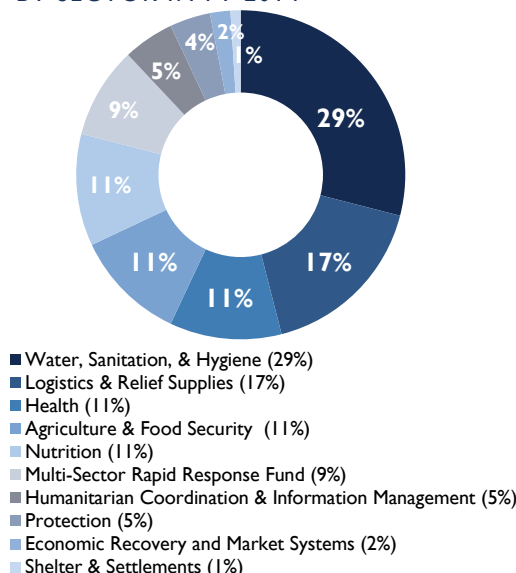
Office of the U.N. High Commissioner for Refugees (UNHCR) – September 2014

244,600

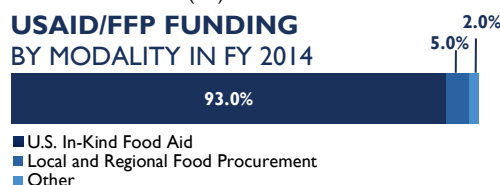
Refugees from Neighboring Countries in South Sudan

UNHCR – September 2014

USAID/OFDA¹ FUNDING BY SECTOR IN FY 2014



USAID/FFP² FUNDING BY MODALITY IN FY 2014



HIGHLIGHTS

- U.S. Government (USG) provides additional \$83 million for emergency response assistance
- Despite improving food security conditions, South Sudan faces one of the world's worst food security crises
- Land works and aid lead to incremental improvements at civilian protection site in Bentiu town, Unity State

EMERGENCY FUNDING

TO SOUTH SUDAN TO DATE IN FY 2014

USAID/OFDA ¹	\$120,119,987
USAID/FFP ²	\$339,650,375
USAID/AFR ³	\$28,000,000
State/PRM ⁴	\$134,276,346

\$622,046,708

TOTAL USAID AND STATE EMERGENCY ASSISTANCE TO SOUTH SUDAN

\$720,688,037

TOTAL USAID AND STATE EMERGENCY ASSISTANCE FOR SOUTH SUDAN CRISIS—INCLUDES FUNDING FOR SOUTH SUDANESE REFUGEES IN NEIGHBORING COUNTRIES

KEY DEVELOPMENTS

- The USG provided an additional \$83 million in emergency assistance for refugees and internally displaced persons (IDPs) in South Sudan and South Sudanese refugees in Ethiopia, Kenya, Sudan, and Uganda. With this contribution, the USG remains the top international donor to the emergency response, providing more than \$720 million in FY 2014.
- Critical food and nutrition assistance for conflict-affected and displaced populations across South Sudan has mitigated the impact of the current crisis on food security and reduced the number of people experiencing Crisis—IPC 3—and Emergency—IPC 4—levels of food insecurity in the near term, according to the IPC Technical Working Group.⁴ However, an estimated 1.5 million people—including one-third of the population of the three most conflict-affected states—will remain in Crisis and Emergency states of food insecurity through December. Conditions are projected to subsequently worsen, and more than 2.5 million people may experience Crisis or Emergency levels of food insecurity from January to March 2015 due to reduced resilience and increasing vulnerability to future shocks resulting from the protracted conflict.

¹ USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA)

² USAID's Office of Food for Peace (USAID/FFP)

³ USAID's Bureau for Africa (USAID/AFR)

⁴ U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM)

⁵ The Integrated Food Security Phase Classification (IPC) is a standardized tool that aims to classify the severity and magnitude of food insecurity. The IPC scale, which is comparable across countries, ranges from Minimal—IPC 1—to Famine—IPC 5.

INSECURITY, DISPLACEMENT, AND ACCESS CONSTRAINTS

- Fighting and food insecurity in South Sudan since December 15, 2013, have displaced more than 1.8 million people, according to the U.N. Of the total, nearly 1.4 million people are internally displaced and more than 460,100 people have sought refuge in neighboring countries.
 - Insecurity in Renk town, Upper Nile State, in recent weeks displaced an unknown number of people north toward the Sudan border and to areas south of Renk, the U.N. reports.
 - From September 22–26, relief agencies suspended non-essential humanitarian services at the U.N. House protection of civilians (PoC) sites in Juba town, Central Equatoria State, following several security incidents with the IDP community in recent weeks, the International Organization for Migration (IOM) reports. Most relief services were reinstated on September 29 following discussions between the IDP community and humanitarian actors.
 - An unpredictable security situation in parts of Piji/Canal County, Jonglei State, in recent days forced relief agency staff to halt humanitarian assessment and response activities in Kaldak town. The relief agency staff instead relocated to Kamel town to conduct multi-sector assessments and humanitarian response operations.
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HUMANITARIAN NEEDS ASSESSMENTS AND RESPONSE ACTIVITIES

- Following a rapid needs assessment in Chuil town, Nyriol County, Jonglei, relief actors identified humanitarian needs—including access to safe drinking water, food assistance, and health and livelihoods support—for displaced and host communities, according to humanitarian organizations. An influx of IDPs to the remote town has strained resources and increased stress on the host community. Specifically, the assessment ascertained a need for water purification tablets, soap, and hygiene promotion activities, as well as fishing equipment and income-generating activities to enhance livelihoods. The assessment team also identified the presence of the vector-borne disease kala-azar, or visceral leishmaniasis, in most households in Chuil, with children among the most affected. In response, relief actors plan to prioritize the distribution of relief commodities, including mosquito nets, to affected populations.
 - U.N. Children’s Fund (UNICEF) and U.N. World Food Program (WFP) rapid response missions have reached more than 500,000 displaced and conflict-affected people—including 100,000 children—in hard-to-reach areas of Jonglei, Unity, and Upper Nile with humanitarian assistance, the U.N. reports. The rapid response missions incorporate a combination of WFP airdrop and airlifts and on-the-ground response activities, which enable relief agencies to distribute emergency food, health care, nutrition, and water, sanitation, and hygiene (WASH) assistance to vulnerable populations, as well as provide protection support to separated or unaccompanied children.
 - In FY 2014, USAID/OFDA and USAID/FFP provided more than \$19 million to UNICEF and \$338.4 million to WFP for emergency response activities—including food, health, nutrition, and WASH assistance and logistical support—in South Sudan and neighboring countries.
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AGRICULTURE, FOOD SECURITY, AND NUTRITION

- While the IPC Technical Working Group’s recently released update demonstrates that the food security situation began improving in August and September across South Sudan and is likely to continue improving through December, South Sudan continues to face one of the worst food security situations in the world. Food assistance has reduced the number of people experiencing acute food insecurity, but 1.5 million people will likely remain in Crisis and Emergency stages of food insecurity through December. Populations are particularly vulnerable in Jonglei, Unity, and Upper Nile, where many households have relied on negative coping mechanisms to survive conflict, displacement, and the May-to-August lean season. As the resilience of displaced and conflict-affected populations is weakened, leaving them susceptible to additional shocks, food security experts project that 2.5 million people may experience Crisis or Emergency levels of food insecurity from January to March 2015.
- Food security analysts warn that the humanitarian community has a short window of opportunity to scale up relief assistance before the end of 2014, when vulnerable households will deplete food stocks and could face increased insecurity. However, sustainable food security improvements are not possible without a meaningful cessation of hostilities.

- Due to a high prevalence of disease and limited access to safe drinking water and health care services, malnutrition levels—particularly among children—have not paralleled improvements in food security, the IPC Technical Working Group and the U.N. report. In conflict-affected areas, levels of global acute malnutrition (GAM) through December are likely to remain above the U.N. World Health Organization (WHO) emergency threshold of 15 percent. Since April, UNICEF has treated more than 55,000 children under the age of five years for severe acute malnutrition (SAM) and plans to reach an estimated 120,000 children by the end of the year.
- Relief agencies have conducted more than 30 Standardized Monitoring and Assessment of Relief and Transitions (SMART) nutrition surveys across South Sudan, identifying GAM levels above 15 percent in nearly half of the assessed counties. Nearly 60 percent of the counties with emergency GAM levels are located in the three most conflict-affected states—Jonglei, Unity, and Upper Nile. Humanitarian agencies plan to conduct additional surveys in the coming months to further inform response efforts.
- A four-barge convoy loaded with 1,157 metric tons (MT) of humanitarian commodities—which departed Juba on September 20—is en route and plans to distribute commodities in three locations near Upper Nile’s Atar town, just south of Malakal town. A third humanitarian barge convoy, destined for Malakal, is currently loading in Juba and plans to depart in the coming weeks.
- In FY 2014, USAID/FFP provided approximately \$339 million in humanitarian funding to WFP, UNICEF, Catholic Relief Services (CRS), and Action Against Hunger/United States (AAH/US) to support critical food assistance and nutrition activities, including general food distributions, blanket supplementary feeding, locally and regionally produced foods, the provision of seeds and basic cultivation tools, and the procurement of ready-to-use therapeutic foods (RUTF) to treat SAM in children under the age of five years.
- With nearly \$14.1 million in FY 2014 funding, USAID/OFDA-funded partners are addressing nutrition needs of vulnerable populations—including children under the age of five years and pregnant and lactating women—across South Sudan, particularly in conflict-affected and hard-to-reach areas.

WASH

- Living conditions for the more than 47,200 IDPs sheltering at the Bentiu PoC site have begun to show incremental improvement, with the construction of a drainage canal and ongoing health and WASH assistance, according to the U.N. and Médecins Sans Frontières (MSF). Although some areas of the PoC site remain flooded, most IDP shelters are dry and road access has improved, MSF reports. The sanitation situation also continues to improve due to relief efforts, with one latrine currently available per 76 people compared to one latrine per 116 people as of September 9; however, access remains below the international Sphere⁵ standard ratio of one latrine per 20 people, according to the U.N.
- The WASH Cluster—the coordinating body for humanitarian WASH activities, comprising U.N. agencies, non-governmental organizations (NGOs), and other stakeholders—and implementing partners have provided WASH assistance to more than 3.1 million conflict-affected people—half of which were displaced—in more than 55 sites since mid-December 2013, reaching 80 percent of targeted beneficiaries, the U.N. reports. WASH assistance efforts include increasing access to safe drinking water, constructing sanitation facilities, distributing soap and water containers, and conducting hygiene promotion activities to stem the spread of diseases, such as cholera.
- With more than \$34,300 from the USAID/OFDA-funded, IOM-managed Rapid Response Fund (RRF), local NGO Dak Organization for Recovery and Development (DORD) will provide WASH assistance to approximately 10,000 IDPs and host community members in Uror County, Jonglei, which has experienced a significant influx of IDPs fleeing violence in nearby areas. DORD plans to rehabilitate boreholes and monitor water quality, design a hygiene and sanitation promotion campaign in the Nuer language, and train hygiene and sanitation promoters.
- In FY 2014, USAID/OFDA provided more than \$37 million for WASH programs across South Sudan, aiming to reduce vulnerable populations’ susceptibility to waterborne and communicable diseases. USAID/OFDA partners are addressing humanitarian WASH needs of vulnerable communities by increasing access to safe drinking water, conducting hygiene promotion campaigns, improving disease surveillance, constructing and maintaining latrines, and assisting with the proper removal of solid waste.

⁵ The Sphere Project was launched in 1997 by the International Committee of the Red Cross, U.N., NGOs, and donors to develop a set of universal minimum standards for humanitarian assistance and thereby improve the quality of assistance provided to disaster-affected persons and to enhance the accountability of humanitarian agencies.

HEALTH

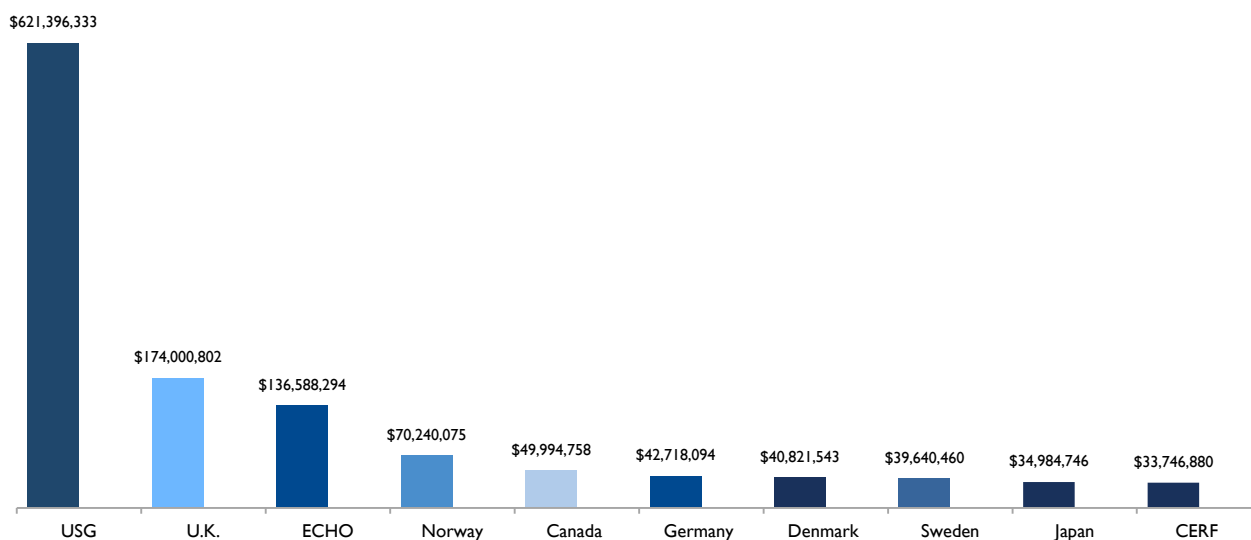
- New reporting from the Government of the Republic of South Sudan (GoRSS) Ministry of Health (MoH) suggests that the current crisis may have contributed to decreasing levels of immunization, particularly in the three most conflict-affected states. On a national level, routine immunization coverage declined to 26 percent in 2014 from 53 percent in 2011. The decline is most severe in Jonglei, Unity, and Upper Nile, where health actors only reached an average of 3 percent of the targeted population. While poor reporting may have contributed to the alarming results, large-scale displacement, insecurity, active conflict, and collapse of health care infrastructure in Jonglei, Unity, and Upper Nile have significantly reduced vulnerable populations' access to health care services, including vaccinations.
 - Malaria remains the primary cause of morbidity at displacement sites in South Sudan, followed by acute respiratory infection and acute watery diarrhea, according to the GoRSS MoH and the U.N. Incidence of malaria infections have increased since late June, particularly at displacement sites in Mingkaman town, Aweril County, Lakes State, and the UNMISS PoC site in Malakal. Between September 15 and 21, health actors provided treatment for nearly 2,300 malaria cases and reported more cases of malaria than the total of all other priority diseases combined. Despite concerns, health actors note that increased levels of malaria are common during the rainy season. Relief organizations—including USAID/OFDA partner the Mentor Initiative—continue to conduct vector control activities in affected areas and promote the use of insecticide-treated mosquito nets.
 - In FY 2014, USAID/OFDA provided more than \$14.1 million to implementing partners for health care activities in South Sudan. USAID/OFDA-funded activities are helping to reduce morbidity and mortality among displaced and other vulnerable populations by providing and increasing access to emergency health care services.
 - With more than \$46,600 in support from the RRF, USAID/OFDA is supporting the efforts of local NGO Aweil Window of Opportunities and Development Agency (AWODA) to conduct hygiene promotion activities at IDP sites in Mingkaman in response to an ongoing Hepatitis E outbreak. AWODA's activities will target more than 92,800 displaced and conflict-affected persons. Health agencies had reported nearly 110 cases of Hepatitis E, including four deaths, at displacement sites in Mingkaman as of September 14, according to the U.N. and the GoRSS MoH
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OTHER HUMANITARIAN ASSISTANCE

- To date, international donors have provided more than \$1.1 billion—approximately 61.1 percent of the \$1.8 billion total requested funding—to support humanitarian activities through the revised South Sudan Crisis Response Plan. At a May 19–20 conference in Oslo, Norway, donor countries pledged more than \$600 million in new funding for humanitarian response efforts in South Sudan and neighboring countries. Donors have committed 88 percent of the Oslo pledges.
- On September 29, Assistant Secretary of State for Population, Refugees, and Migration Anne C. Richard announced nearly \$83 million in additional emergency assistance for refugees, IDPs, and other conflict-affected populations in South Sudan and South Sudanese seeking refuge in neighboring countries, bringing total USG emergency funding in FY 2014 to more than \$720 million. The contribution includes additional funding from USAID/OFDA, USAID/FFP, USAID/AFR, and State/PRM. Since the conflict erupted in December 2013, the USG has remained the top international donor for humanitarian operations in South Sudan and neighboring countries in response to the crisis.
- The European Commission's Directorate-General for Humanitarian Aid and Civil Protection (ECHO) announced an additional contribution of 20 million euros—approximately \$25.7 million—on September 25 to support the humanitarian response to the crisis in South Sudan, according to the E.U. The new funding brings ECHO's total support for the crisis to more than 120 million euros—or more than \$153.9 million—since December 2013.
- On September 25, the U.K. Department for International Development (DFID) announced 25 million British pounds—approximately \$40.9 million—in additional funding to support relief efforts for those affected by the current crisis. Since the conflict began in December, DFID has contributed 150 million British pounds—or nearly \$245.7 million—to the humanitarian response.

2014 TOTAL HUMANITARIAN FUNDING*

PER DONOR



*Funding figures are as of September 30, 2014. All international figures are according to OCHA's Financial Tracking Service (FTS) and based on international commitments during the 2014 calendar year. U.S. Government (USG) figures are according to the USG and reflect the most recent USG commitments based on the 2014 fiscal year, which began on October 1, 2013.

CONTEXT

- The January 2005 signing of the Comprehensive Peace Agreement (CPA) between the Government of Sudan (GoS) and the southern-based Sudan People's Liberation Movement officially ended more than two decades of north-south conflict during which famine, fighting, and disease killed an estimated 2 million people and displaced at least 4.5 million others within Sudan.
- The GoRSS declared independence on July 9, 2011, after a January 9, 2011, referendum on self-determination stipulated in the CPA. Upon independence, USAID designated a new mission in Juba, the capital city of South Sudan.
- Insecurity, landmines, and limited transportation and communication infrastructure restrict humanitarian activities across South Sudan, hindering the delivery of critical assistance to populations in need, particularly in Jonglei, Unity, and Upper Nile.
- On October 24, 2013, U.S. Ambassador Susan D. Page re-declared a disaster in South Sudan due to the ongoing complex emergency caused by population displacement, returnee inflows from Sudan, continued armed conflict, and perennial environmental shocks—including flooding—that compound humanitarian needs.
- On December 15, clashes erupted in the capital city, Juba, between factions within the GoRSS and quickly spread into a protracted national conflict with Jonglei, Unity, and Upper Nile states representing the primary areas of fighting and displacement. Due to the unrest, the U.S. Embassy in Juba initially ordered the departure of non-emergency USG personnel from South Sudan. On December 20, USAID activated a Disaster Assistance Response Team (DART), now based in Juba, to lead the USG response to the developing crisis in South Sudan. USAID also stood up a Washington, D.C.-based Response Management Team (RMT) to support the DART.

USAID AND STATE EMERGENCY ASSISTANCE TO SOUTH SUDAN PROVIDED IN FY 2014¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA²			
AAH/US	Nutrition	Abyei Area, Countrywide	\$1,205,012
AAH/US	WASH	Northern Bahr el Ghazal State	\$4,000,000
Agency for Technical Cooperation and Development (ACTED)	Humanitarian Coordination and Information Management, Shelter and Settlements, WASH	Central Equatoria, Jonglei, Lakes	\$3,250,000
American Refugee Committee (ARC)	Protection	Eastern Equatoria, Northern Bahr el Ghazal, Warrap State	\$1,458,595
CARE	Agriculture and Food Security, WASH	Jonglei	\$3,586,439
CRS	Logistics Support and Relief Commodities, WASH	Jonglei, Lakes	\$2,618,893
Concern	Nutrition	Unity	\$721,848
U.N. Food and Agriculture Organization (FAO)	Agriculture and Food Security	Countrywide	\$10,000,000
Fleet Forum	Humanitarian Coordination and Information Management	Countrywide	\$72,311
Food for the Hungry (FH)	Agriculture and Food Security, Logistics Support and Relief Commodities, WASH	Jonglei, Upper Nile	\$1,535,793
GOAL	Health, Nutrition, WASH	Abyei Area, Upper Nile	\$5,016,057
IMA World Health	Health, Nutrition	Jonglei, Unity, Upper Nile	\$2,016,629
International Medical Corps (IMC)	Health, Nutrition	Central Equatoria, Jonglei, Lakes	\$2,820,186
IOM	RRF	Countrywide	\$11,000,000
IOM	WASH	Unity	\$2,143,777
IOM	Logistics Support and Relief Commodities	Central Equatoria, Upper Nile	\$1,637,966
IOM	Logistics Support and Relief Commodities	Unity, Upper Nile	\$1,285,477
International Rescue Committee (IRC)	Health, Protection, WASH	Unity	\$2,747,255
Medair	Health, Humanitarian Coordination and Information Management, Nutrition, WASH	Countrywide, Upper Nile	\$4,810,889
Mentor	Health	Abyei Area, Lakes, Upper Nile, Warrap	\$2,979,450
Mercy Corps	Agriculture and Food Security, Economic Recovery and Market Systems, Logistics Support and Relief Commodities, WASH	Abyei Area, Unity	\$3,936,987
OCHA	Humanitarian Coordination and Information Management	Countrywide	\$2,500,000
Oxfam/Great Britain (Oxfam/GB)	Agriculture and Food Security, WASH	Upper Nile	\$2,986,516
Samaritan's Purse	Nutrition, WASH	Unity	\$3,879,504
Solidarités	WASH	Central Equatoria, Upper Nile	\$775,000
Tearfund	Nutrition	Jonglei	\$992,687
UNICEF	Health, Nutrition, Protection, WASH	Countrywide	\$14,025,000
USAID/OFDA Commodity Airlifts	Logistics Support and Relief Commodities	Countrywide	\$901,990
WHO	Health	Countrywide	\$2,700,000
WFP	Logistics Support and Relief Commodities	Countrywide	\$11,800,000
U.N. Humanitarian Air Service (UNHAS)	Logistics Support and Relief Commodities	Countrywide	\$4,200,000
World Relief International (WRI)	Nutrition	Unity	\$1,025,881
World Vision	Agriculture and Food Security, Humanitarian Coordination and Information Management, Logistics Support and Relief Commodities, WASH	Upper Nile	\$3,301,949

Program Support	\$2,187,896
TOTAL USAID/OFDA ASSISTANCE	\$120,119,987

USAID/FFP ³			
AAH/US	Nutrition	Northern Bahr el Ghazal, Warrap	\$635,875
CRS	5,810 MT of Emergency Food Assistance	Jonglei	\$11,614,500
UNICEF	590 MT of RUTF	Countrywide	\$5,000,000
WFP	107,450 MT of Food Assistance	Countrywide	\$322,400,000
TOTAL USAID/FFP ASSISTANCE			\$339,650,375

USAID/AFR			
Planned Activities	Education, Protection, WASH	Countrywide	\$28,000,000
TOTAL USAID/AFR ASSISTANCE			\$28,000,000

STATE/PRM			
ACTED	Multi-Sector Assistance, Protection	Upper Nile	\$1,500,000
Danish Refugee Council	Multi-Sector Assistance, Protection	Upper Nile	\$763,937
International Committee of the Red Cross (ICRC)	Multi-Sector Assistance, Protection	Countrywide	\$36,200,000
IMC	Health	Upper Nile	\$1,500,000
IOM	WASH	Upper Nile	\$1,200,000
IRC	Protection	Unity	\$1,500,000
Lutheran World Relief (LWR)	Multi-Sector Assistance, Protection	Unity, Upper Nile	\$1,499,919
Medair	Health	Upper Nile	\$1,000,000
Mentor	Health	Upper Nile	\$309,538
UNHCR	Multi-Sector Assistance, Protection	Countrywide	\$86,500,000
U.N. Office for Project Services (UNOPS)	Infrastructure	Unity	\$1,502,952
World Vision	Multi-Sector Assistance	Western Equatoria	\$800,000
TOTAL STATE/PRM ASSISTANCE			\$134,276,346
TOTAL USAID AND STATE EMERGENCY ASSISTANCE TO SOUTH SUDAN IN FY 2014			\$622,046,708

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds.

² USAID/OFDA funding represents anticipated or actual obligated amounts as of September 30.

³ Estimated value of food assistance.

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for response efforts around the world can be found at www.interaction.org.
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietary, and environmentally appropriate assistance.
- More information can be found at:
 - The Center for International Disaster Information: www.cidi.org or +1.202.821.1999.
 - Information on relief activities of the humanitarian community can be found at www.reliefweb.int

USAID/OFDA bulletins appear on the USAID website at <http://www.usaid.gov/what-we-do/working-crises-and-conflict/responding-times-crisis/where-we-work>